

MONTANA LEGISLATIVE HISTORY

Chapter 274 19 91

Bill H _____ S 212 Original bill & history _____C

H. Committee on Human Services & Aging

Hearing Date(s) Mar 12 ✓ C

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_____ C

Date Out Mar 13 ✓ C

S. Committee on Public Health, Welfare & Safety

Hearing Date(s) Feb 04 ✓ C

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Feb 04 ✓ C

Did this bill originate in an interim committee? _____ Yes _____ No

Committee _____

Report _____

SB 217 INTRODUCED BY ECK

AUTHORIZE INTERSTATE COMPACTS ON ADOPTION AND
MEDICAL ASSISTANCE

BY REQUEST OF DEPARTMENT OF FAMILY SERVICES

1/28	INTRODUCED		
1/29	REFERRED TO PUBLIC HEALTH, WELFARE & SAFETY		
1/29	FIRST READING		
1/29	FISCAL NOTE REQUESTED		
2/04	HEARING		
2/04	FISCAL NOTE RECEIVED		
2/04	FISCAL NOTE PRINTED		
2/05	COMMITTEE REPORT—BILL PASSED		
2/07	2ND READING PASSED	49	0
2/09	3RD READING PASSED	47	0
	TRANSMITTED TO HOUSE		
2/11	FIRST READING		
2/11	REFERRED TO HUMAN SERVICES & AGING		
3/12	HEARING		
3/13	COMMITTEE REPORT—BILL CONCURRED		
3/16	2ND READING CONCURRED	91	0
3/18	3RD READING CONCURRED	98	0
	RETURNED TO SENATE		
3/22	SIGNED BY PRESIDENT		
3/23	SIGNED BY SPEAKER		
3/25	TRANSMITTED TO GOVERNOR		
3/29	SIGNED BY GOVERNOR		
	CHAPTER NUMBER 274		

EFFECTIVE DATE: 3/29/91

SB 218 INTRODUCED BY ECK

PROVIDE UNIFORM TAXATION OF RETIREMENT INCOME AND
INCREASE STATE BENEFITS

1/28	INTRODUCED
1/29	REFERRED TO TAXATION
1/29	FIRST READING
1/29	FISCAL NOTE REQUESTED
2/01	HEARING
2/04	FISCAL NOTE RECEIVED
2/04	FISCAL NOTE PRINTED
3/12	TABLED IN COMMITTEE

SB 219 INTRODUCED BY BIANCHI

REMOVE 10-MILE LIMIT ON SHOOTING PRESERVE LOCATION
AND SET FLAT LICENSE FEE

1/29	INTRODUCED		
1/29	REFERRED TO FISH & GAME		
1/29	FIRST READING		
1/29	FISCAL NOTE REQUESTED		
2/01	FISCAL NOTE RECEIVED		
2/04	FISCAL NOTE PRINTED		
2/19	HEARING		
2/20	COMMITTEE REPORT—BILL PASSED		
2/21	2ND READING PASSED	49	0
2/22	3RD READING PASSED	48	1
	TRANSMITTED TO HOUSE		
3/04	FIRST READING		
3/04	REFERRED TO FISH & GAME		
3/18	HEARING		
3/18	TABLED IN COMMITTEE		

MINUTES

MONTANA SENATE
52nd LEGISLATURE - REGULAR SESSION

COMMITTEE ON PUBLIC HEALTH, WELFARE & SAFETY

Call to Order: By Chairman Dorothy Eck, on February 4, 1991, at 3:05 p.m.

ROLL CALL

Members Present:

Dorothy Eck, Chairman (D)
Eve Franklin, Vice Chairman (D)
James Burnett (R)
Thomas Hager (R)
Judy Jacobson (D)
Bob Pipinich (D)
David Rye (R)
Thomas Towe (D)

Members Excused: None

Staff Present: Tom Gomez (Legislative Council)
Christine Mangiantini (Committee Secretary)

Please Note: These are summary minutes. Testimony and discussion are paraphrased and condensed.

Announcements/Discussion:

HEARING ON SENATE BILL 217

Presentation and Opening Statement by Sponsor:

Senator Eck explained the measure by saying if a child is adopted and the family moves out-of-state or if a child is adopted by out-of-state residents, the bill allows the state to continue to provide health services. This makes it easier for adoptions to take place. She introduced the resource persons from the Department of Family Services (DFS) that were available to answer questions.

Proponents' Testimony:

The designated chairman, Senator Eve Franklin called for proponents to the measure. There being none she recognized Mr. John Melcher, Jr., legal counsel, Department of Family Services as a resource witness. See Exhibit #1 for a copy of his remarks.

There being no further proponents, chairman Eve Franklin called for opponents.

Opponents' Testimony:

There were none.

Questions From Committee Members:

The chairman recognized Senator Pipinich who asked Mr. Melcher if other states provide the same benefits as Montana.

Mr. Melcher replied that they do in general. But it is doubtful you will find the exact same benefits. He said Montana Medicaid provides more services than Wyoming. He said he had discussions about the bill with staff at the Department of Social and Rehabilitation Services (SRS).

The chairman recognized Senator Towe who asked Mr. Melcher if the bill addresses continuing Montana's aid to the adopted child that leaves the state and that Montana benefits continue even when the child becomes a resident of another state.

Mr. Melcher said that federal law will probably not change the requirement in the Social Security Act which states that a Medicaid card be issued from the Medicaid program of the child's residence. If the Montana Medicaid provides additional money for eyeglasses for example, that New York does not provide, the question becomes the administration of the additional benefits since the child has to participate in the New York Medicaid program. The American Public Welfare Association has authored language for uniform compacts which will guarantee federal funds participation and also a procedure for administering the additional benefits. A person that moves to New York will be issued a New York state Medicaid card. If the person needs services in addition to what New York state provides, Montana will reimburse the person directly or reimburse through New York Medicaid. Two methods are suggested so states may claim federal financial participation for the cost of Medicaid services not covered by the state of residence. The first suggestion is an interstate agreement. The resident state agrees to provide the services and is reimbursed by the adoption assistance state for the non-covered services. Federal participation is claimed by the adoption assistance state.

The chairman recognized Senator Burnett who asked if the bill would only affect states that have reciprocity with Montana.

Mr. Melcher said DFS and SRS will closely monitor the reciprocity requirement in the compacts. They feel it is not in our best interest to get in a situation where states are demanding services provided by Montana Medicaid without federal funds participation.

The chairman recognized Senator Towe who asked what happens to the New York resident that comes to Montana.

Mr. Melcher said the New York resident would seek to protect their benefits. Montana Medicaid is going to extend additional benefits when they are specified in the compact. We do not want people to enter adoption assistance agreements that provide for additional benefits having moved to another state then have them not be able to get the benefits agreed to in the compact.

The chairman recognized Senator Pipinich that said a similar bill passed last session. The bill would save approximately \$550,000 by adopting the subsidized case out. He said he would like to see a fiscal note on the bill.

Senator Eck said she received a fiscal note at her senate desk today. She said the department has dealt with the problems and the implication is that there is no fiscal impact or it would be negligible.

The chairman recognized Senator Towe who asked what his fiscal note was for the bill he passed last session.

Senator Pipinich said it saved the state \$350,000.

Mr. Melcher said that federal law already requires continuation of everything agreed to in the adoption assistance agreement. There will be no fiscal impact as long as federal law remains the same. He said the is needed bill to set procedures so if you move a child to Idaho the Department can denote Medicaid procedures.

The chairman recognized Senator Pipinich who said the bill that passed last session included a clause about agreement with the party who adopted the child that we would take care of the child. Why do we need to issue a Medicaid card to the individual if they leave the state.

Mr. Melcher said the benefits under the adoption assistance agreement are not only those provided by the state but provided with federal funds participation. The Medicaid card must be issued by the state where the child resides, that is in the Social Security Act. We need to facilitate federal regulations to ease the process so someone does not move to another state and wait six weeks for the paperwork to be processed.

The chairman recognized Senator Towe who asked if it was common having difficulty getting a Medicaid card in the state they relocated to.

Mr. Melcher said it is a common complaint. He said we are committed to paying the Medicaid costs. This bill does not entitle new rights to benefits it essentially authorizes DFS to set up adequate procedures to continue the benefits without significant delays.

The chairman recognized Senator Hager who asked if we pass the bill, if it will provide a commitment from the other state.

Mr. Melcher said an example may be easier to understand. There is a severely emotionally disturbed child in New York, a couple would like to adopt the child but cannot afford the therapy. New York state officials say they have subsidized adoption and will enter into an agreement, provide a Medicaid card which will include additional benefits provided by New York state like psychotherapy. The couple adopts the child and moves to Montana. They continue to be Medicaid eligible. If Montana has a reciprocal agreement with New York state, any additional benefits Montana Medicaid will not pay for will be paid by New York. The bill only authorizes DFS to set up procedures to effectively administer a federal requirement. The 24 states that have entered compacts want the language in state statutes. They want the compact to have the force of law.

The chairman recognized Senator Towe who asked if the bill did not pass if DFS was going to do it anyway, but the bill would make the agreements proper.

Mr. Melcher said DFS could do it but could not join the association working towards a uniform compact. If you have one set of procedures in all 50 states the ease of moving through the states is greatly increased for the families having the adoptive assistance agreements. If the bill does not pass it would be up to the family to enforce the Montana agreement in another state. They could conceivably run against all sorts of problems.

Closing by Sponsor:

Senator Eck said she should have explained the bill more simply to begin with. She said the bill sets up a process whereby Montana and other states are using the same kind of agreements. She does not think there will be a fiscal impact. She said it is a good bill.

EXECUTIVE ACTION ON SENATE BILL 217

Motion:

Senator Towe moved to pass SB 217 without amendments.

Discussion:

No questions.

Amendments, Discussion, and Votes:

None.

Recommendation and Vote:

The motion passed unanimously.

EXECUTIVE ACTION ON HOUSE BILL 118

Motion:

Senator Jacobson made a motion to allow the chairman to recognize Mr. Jim Nelson who would answer committee questions on HB 118.

Discussion:

The chairman recognized Jim Nelson, Sunrise Coordinator, State Auditors Office. See Exhibit #2 for a copy of his testimony to the committee. He said the way HB 118 is currently worded it provides for the licensing of pharmacy technicians.

Senator Eck asked where the bill established licensing, he read from the bill and noted that the utilization plan sets up a form of permission. Under the broad definition of Sunrise it establishes itself as a license.

Senator Towe asked about the broad definition of Sunrise. If we were to take out the portion of the bill that relates to training of pharmacy technicians so under a utilization plan certain persons in the pharmacy office could perform certain functions. Not spelling out who it is and where it is.

Mr. Nelson said he did receive amendments that change the bill to delegation of authority rather than licensing. He said after he looked through the amendments he found a problem on page 9, lines 9 & 10.

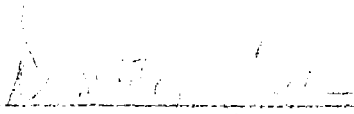
Date 2/4/91

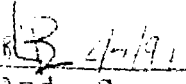
SENATE STANDING COMMITTEE REPORT

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MR. PRESIDENT:

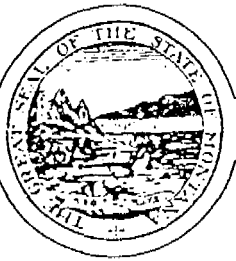
We, your committee on Public Health, Welfare, and Safety having had under consideration Senate Bill No. 217 (first reading copy - white), respectfully report that Senate Bill No. 217 be pass.

Signed 
Dorothy Eck, Chairman

 2/7/91
Amd. Coord.

Sec. of Senate

DEPARTMENT OF FAMILY SERVICES



STAN STEPHENS, GOVERNOR

(406) 444-5900

STATE OF MONTANA

P.O. BOX 8005
HELENA, MONTANA 59604

February 1, 1991

To: Sen. Dorothy Eck
From: John Melcher, Jr., Dept. Attorney

SENATE HEALTH & WELFARE

EXHIBIT NO. 1

DATE 2-4-91

BILL NO. SB 217

SUMMARY OF SB 217

AN ACT AUTHORIZING THE DEPARTMENT OF FAMILY SERVICES AND THE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES TO ENTER INTO INTERSTATE ADOPTION ASSISTANCE COMPACTS; AUTHORIZING PROCEDURES FOR INTERSTATE SERVICES AND PAYMENTS; AND PROVIDING AN IMMEDIATE EFFECTIVE DATE.

DFS and SRS already jointly administer state and federal adoption benefits available to encourage adoption of children whose circumstances (for example physical or mental disabilities) make them "hard to place" under applicable Montana law, or designate them as "special needs" children under applicable federal law. Available benefits include support services from DFS workers, medical benefits, and financial assistance. This bill aims at improving these services by authorizing agreements between Montana and states providing similar benefits for continuation of benefits when covered children move between the party states. This includes interstate continuation of medical benefits which exceed federally aided medical benefits. Montana medicaid currently provides these additional medical benefits.

- Federal law mandates protection of federal adoption benefits when a covered child moves to or from states participating in the federal program. Federal law also recommends interstate compacts to provide for benefit continuation, and mandates that the

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2-4-91
SB 217

Secretary of the Department of Health and Human Services (HHS) encourage and assist states who might enter such compacts. SB 217 is based on a model act developed through HHS funding. (See attached Model Act with explanation on each section.)

Twenty four states have complied with the federal mandate by authorizing interstate compacts through legislation based on the model act. In addition to assuring federal approval, these states have realized greater efficiency through uniform administrative requirements. These states have also joined the Association of Administrators of the Interstate Compact on Adoption and Medical Assistance, Inc., a Washington D.C. based group advocating the creation and implementation of a single, essentially uniform compact. Currently, the 24 states have accomplished implementation of such a compact.

SB 217 would authorize DFS and SRS to join these states in associating for the implementation of a uniform compact. It is expected that services to interstate families will be greatly improved, and less DFS staff time and energy will be expended in meeting the federally required continuation of benefits. Passage of this bill is a win-win situation for DFS and those interested in facilitating adoption of hard to place children.

Attached is additional material which further explains the model act and the goal of implementing a single compact. Please contact me if you have any additional questions or concerns whatsoever.

JOHN.

2-4-91

Exhibit 1 also contains material as follows:

"Interstate Compact on Adoption and Medical Assistance" W-Memo, V. 2, #10, 11/90

"Interstate Compact on Adoption and Medical Assistance:
Questions and Answers"

"Suggested Act Authorizing an Adoption Assistance Compact
and Procedures for Interstate Services Payments"
from the Association of Administrators of the Interstate
Compact on Adoption and Medical Assistance, Inc.

The originals are stored at the Montana Historical Society,
225 North Roberts, Helena, MT 59601. (Phone 406-444-
4775).

ROLL CALL VOTE

SENATE COMMITTEE PUBLIC HEALTH, WELFARE & SAFETY

Date February 4, 1991 Senate Bill No. 217 Time 3:30 p.m.

NAME	YES	NO
SENATOR BURNETT	X	
SENATOR FRANKLIN	X	
SENATOR HAGER	X	
SENATOR JACOBSON	X	
SENATOR PIPINICH	X	
SENATOR RYE	X	
SENATOR TOWE	X	
SENATOR ECK	X	

Secretary

Chairman

Motion: Senator Towe made a motion to pass SB 217. There being
no objections the motion carried unanimously.

heard about mandatory benefits and this bill being one of those. He doesn't see this bill being a mandatory benefit at all. A benefit would be a new kind of coverage. Here we are talking about a freedom of provider, that if he had an illness and if he were to go to a medical doctor, he would be covered. Those costs would be incurred, if she chose to go to an acupuncturists, she would not be going to the physician so the costs would balance. We are looking at freedom of provider and that should be the persons right.

Vote: Motion carried 16-4 with REPS. BECKER, BOHARSKI, KASTEN and MESSMORE voting no.

HEARING ON SB 217

Presentation and Opening Statement by Sponsor:

SEN. DOROTHY ECK, Senate District 40, Bozeman, stated that SB 217 would allow the Department of Social and Rehabilitative Services (SRS) and Department of Family Services (DFS) through their Medicaid program and other services to continue to provide services for adoptive children who are hard to place. This has been a very successful program. The federal government mandates that they enter into cooperative agreements with other states to provide these services through the administrative processes to standardize so everyone knows what to expect when an adopted child leaves the State of Montana.

Proponents' Testimony:

John Melcher, Jr., Department of Family Services, submitted written testimony. EXHIBIT 7

Opponents' Testimony: None

Questions From Committee Members: None

Closing by Sponsor: SEN. ECK closed on the bill.

EXECUTIVE ACTION ON SB 217

Motion/Vote: REP. J. RICE MOVED SB 217 BE CONCURRED IN. Motion carried unanimously.

HEARING ON SB 174

Presentation and Opening Statement by Sponsor:

SEN. EVE FRANKLIN, Senate District 17, Great Falls, stated that this bill deals primarily with continuing education mandate and requiring clinical psychologists (CP) to engage and continue an education program. It also increases the fee for administering continuing education, changes the length of term for board members and inserts language requiring two years to provide experience prior to applying for licensure for CPs. The last

HOUSE OF REPRESENTATIVES

HUMAN SERVICES AND AGING COMMITTEE

ROLL CALL

DATE 3-12-91

NAME	PRESENT	ABSENT	EXCUSED
REP. ANGELA RUSSELL, CHAIR	✓		
REP. TIM WHALEN, VICE-CHAIR	✓		
REP. ARLENE BECKER	✓		
REP. WILLIAM BOHARSKI			✓
REP. JAN BROWN	✓		
REP. BRENT CROMLEY	✓		
REP. TIM DOWELL	✓		
REP. PATRICK GALVIN	✓		
REP. STELLA JEAN HANSEN	✓		
REP. ROYAL JOHNSON	✓		
REP. BETTY LOU KASTEN	✓		
REP. THOMAS LEE	✓		
REP. CHARLOTTE MESSMORE	✓		
REP. JIM RICE	✓		
REP. SHEILA RICE	✓		
REP. WILBUR SPRING	✓		
REP. CAROLYN SQUIRES			✓
REP. JESSICA STICKNEY	✓		
REP. BILL STRIZICH			✓
REP. ROLPH TUNBY	✓		

HOUSE STANDING COMMITTEE REPORT

March 13, 1991

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Mr. Speaker: We, the committee on Human Services and Aging
report that Senate Bill 217 (third reading copy -- blue) be
concurrent in .

Signed: _____
Angela Russell, Chairman

Carried by: Rep. Lee

DEPARTMENT OF FAMILY SERVICES

3-12-91
SB 217



STAN STEPHENS, GOVERNOR

(406) 444-5900

STATE OF MONTANA

P.O. BOX 8005
HELENA, MONTANA 59604

TESTIMONY IN SUPPORT OF SB 217

"AN ACT AUTHORIZING THE DEPARTMENT OF FAMILY SERVICES AND THE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES TO ENTER INTO INTERSTATE ADOPTION ASSISTANCE COMPACTS; AUTHORIZING PROCEDURES FOR INTERSTATE SERVICES AND PAYMENTS; AND PROVIDING AN IMMEDIATE EFFECTIVE DATE."

Submitted by John Melcher, Jr.
Staff Attorney for the Department of Family Services

Children with special needs as a result of physical or mental disabilities are often difficult to place. Montana and federal law encourage special needs placements through services and benefits created under the Social Security Act, and the Montana Subsidized Adoption Act. In addition to benefits and programs encouraging adoption of children with physical and mental disabilities, the Montana program attempts to place siblings into the same adoptive family.

Adoption assistance agreements entered by DFS and the prospective parents set out the benefits and services to be provided. SRS administers the medicaid benefits available under the agreements. The problem addressed by SB 217 is the question of how to continue these services and benefits when a covered child moves to another state. The bill attempts to resolve this problem by authorizing DFS and SRS to enter interstate compacts setting uniform procedures to be followed to continue the benefits and services.

Federal law already mandates continuation of federal benefits, and has encouraged interstate compacts to implement continuation. However, this bill is the first attempt to authorize such agreements in Montana. Twenty four other states have already passed authorizing acts and entered agreements to implement an essentially uniform compact.

Families moving between states with children covered by adoption assistance agreements have repeatedly complained to DFS about eligibility problems they encounter in their new home state. For example, imagine that you and your family move between one state and another state in the absence of a compact. Your adopted child requires medicaid covered psychological therapy which must continue uninterrupted. The lack of a compact between your new state and your old state makes information on how to obtain a new medicaid card uncertain. After you have accomplished the move you attempt to obtain a medicaid card. You arrive at the county human services office which, in your old state administered the benefits, and an official informs you that you must apply at the state office. The state office tells you

it will process your application, but when you arrive to fill out the application, you discover that you must bring a copy of your adoption assistance agreement along with your certificate of eligibility for federal IV-E benefits. You make a phone call to the state office in your former state, and the state employee tells you to contact the county office for copies of the proper adoption assistance agreement and the IV-E certification. You call the county office, and the worker you need to speak with is on vacation. Finally, after a delay of several weeks you receive your new card, and then discover that psychological services are currently unavailable under their medicaid program.

Assume that these same parents are involved with states party to a compact. The first problem encountered, confusion as to the proper officials to contact, is resolved because each state party to a compact must agree to designate a compact administrator to help with the paper work. Second, the problem of lack of proper documentation should be alleviated because the compact will require the compact administrator of the old residence state to send all medicaid documentation upon request. Specific forms used in both states are already developed and printed to make the request, and to notify the parents of receipt of the documentation when it arrives. A medicaid card must immediately issue.

The third problem here, a reduction in services, may also be alleviated with the help of the compacts. A compact may provide for reciprocal duties for continuation in the new state of all services formerly obtained through medicaid in the old state. SRS has indicated that federal law already requires continuation, and HHS has indicated that specific provisions in compacts are acceptable for implementing continuation and guaranteeing federal funds participation.

The key to efficient uniform interstate administration of benefits is the ability to enter binding agreements obligating new residence states to efficiently provide for full continuation of benefits. With the authority provided by this bill, DFS and SRS will have this ability.